

Retail Food Inspection Report


Floyd County Health Department
Telephone (812) 948-4726

Establishment Name HAMPTON INN	Telephone Number Est 812-945-2771 Own 812-945-2771	Date of Inspection 08/05/2020	ID#
Address 411 WEST SPRING STREET, NEW ALBANY IN 47150			
Owner NEW ALBANY HOSPITALITY	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 08/05/2020
Owner's Address 411 W. SPRING ST. NEW ALBANY, IN 47150-		Menu Type 1 <input type="checkbox"/> 2 <input checked="" type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/>	
Person in Charge ANTHONY WESTMORELAND			
Responsible Person's Email SHANNON.MURPHY@GHS-HOTELS.COM			
Certified Food Handler			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
438	X			Observed unlabeled chemical sprayer at 3-comp sink in kitchen.	TODAY
243		X		Observed single-use cases stored on kitchen floor.	TODAY
433		X		Observed soiled mop left in mechanical room.	TODAY

Summary of Violations	C	<u>1</u>	NC	<u>2</u>	R	<u>0</u>
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Received by (name and title printed): ANTHONY WESTMORELAND		Inspected by (name and title printed): A.J. Ingram CHIEF FOOD SPECIALIST	
Received by (signature):		Inspected by (signature): 	
cc:	cc:	cc:	